

ARIZONA HEALTHCARE COST CONTAINMENT SYSTEM



SUBSTANTIVE POLICY MANUAL

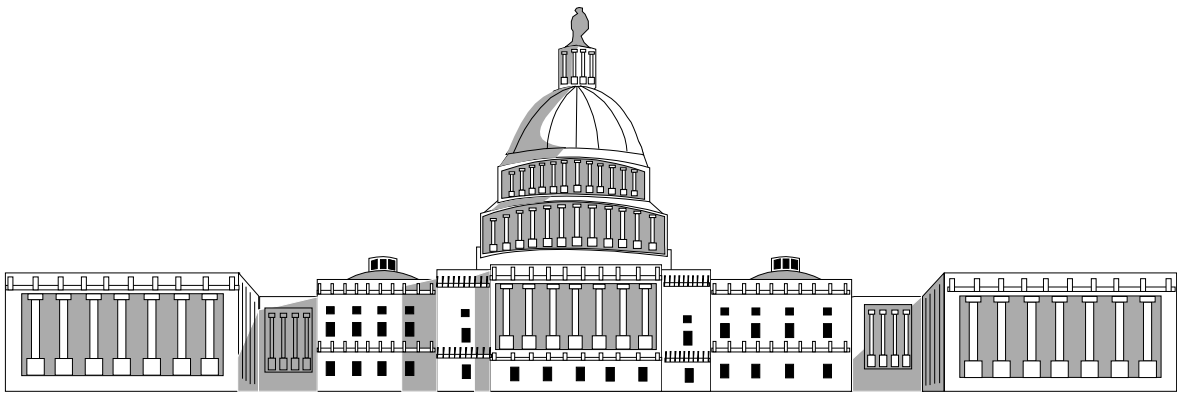
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TABLE OF CONTENTS

RULES.....	
TITLE 9. HEALTH SERVICES	1
CHAPTER 22.....	1
CHAPTER 27.....	7
CHAPTER 28.....	9
CHAPTER 29.....	13
CHAPTER 30.....	14
CHAPTER 31.....	17
CHAPTER 32.....	23
SUBSTANTIVEPOLICY STATEMENTS	
SUBSTANTIVE POLICY STATEMENTS.....	
<i>KidsCare Manual</i>	22
<i>AHCCCS Medical Benefits Eligibility Policy and Procedures Manual</i>	22
<i>ALTCS Eligibility Policy and Procedure Manual</i>	22
<i>SSI/MAO Policy and Procedures Manual</i>	22
INCORPORATIONS BY REFERENCE	
TITLE 9. HEALTH SERVICES	25
CHAPTER 22.....	25
CHAPTER 27.....	25
CHAPTER 28.....	25
CHAPTER 29.....	26
CHAPTER 30.....	26
CHAPTER 31.....	26
CHAPTER 32.....	26

Rules



TITLE 9. HEALTH SERVICES
CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

The rules in this Chapter set forth standards for the AHCCCS acute care program, under the authority of A.R.S. Title 36, Chapter 29, Article 1. Specific subjects of these rules are indicated in the following table of contents.

Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-22-101	Location of Definitions	07/15/02
R9-22-102	Scope of Services Related Definitions	05/09/02
R9-22-103	Repealed	01/08/99
R9-22-104	Reserved	N/A
R9-22-105	General Provisions and Standards Related Definitions	06/09/00
R9-22-106	Request for Proposals (RFP) Related Definitions	06/09/00
R9-22-107	Standard for Payments Related Definitions	07/15/02
R9-22-108	Grievance and Request for Hearing Related Definitions	08/07/00
R9-22-109	Quality Control Related Definitions	10/01/01
R9-22-110	1st– and 3rd–Party Liability Related Definitions	06/09/00
R9-22-111	Reserved	N/A
R9-22-112	Behavioral Health Services Related Definitions	10/01/01
R9-22-113	Reserved	N/A
R9-22-114	AHCCCS Medical Coverage for Families & Individuals Related Definitions	10/01/01
R9-22-115	AHCCCS Medical Coverage for People who are Aged, Blind or Disabled Related Definitions	10/01/01
R9-22-116	Repealed	10/01/01
R9-22-117	Enrollment Related Definitions	10/01/01
R9-22-118	Reserved	N/A
R9-22-119	Reserved	N/A
R9-22-120	Breast & Cervical Cancer Treatment Program Related Definitions	12/06/01
ARTICLE 2 – SCOPE OF SERVICES		
R9-22-201	General Requirements	06/09/02
R9-22-202	Repealed	09/22/97
R9-22-203	Repealed	09/22/97
R9-22-204	Inpatient General Hospital Services	06/09/02
R9-22-205	Attending Physician, Practitioner, Primary Care Provider Services	06/09/02
R9-22-206	Organ and Tissue Transplant Services	12/01/01
R9-22-207	Dental Services	06/09/02
R9-22-208	Laboratory, Radiology and Medical Imaging Services	06/09/02
R9-22-209	Pharmaceutical Services	06/09/02
R9-22-210	Emergency Medical and Behavioral Health Services	06/09/02
R9-22-211	Transportation Services	06/09/02
R9-22-212	Medical Supplies, Durable Medical Equipment, and Orthotic and Prosthetic Devices	06/09/02
R9-22-213	Early and Periodic Screening, Diagnosis, and Treatment Services (E.P.S.D.T.)	06/09/02
R9-22-214	Repealed	09/22/97
R9-22-215	Other Medical Professional Services	06/09/02
R9-22-216	NF, Alternative HCBS Setting, or HCBS	06/09/02
R9-22-217	Services Included in the State and Federal Emergency Services Programs	12/01/01

R9-22-218	Repealed	09/22/97
ARTICLE 3 – REPEALED		
ARTICLE 4 – REPEALED		
ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-22-501	Pre-existing Conditions	12/08/97
R9-22-502	Availability and Accessibility of Service	12/08/97
R9-22-503	Repealed	07/15/02
R9-22-504	Marketing; Prohibition against Inducements; Misrepresentations; Discrimination; Sanctions	12/08/97
R9-22-505	Approval of Advertisements and Marketing Materials	12/08/97
R9-22-506	Repealed	12/08/97
R9-22-507	Member Record	12/08/97
R9-22-508	Limitation of Benefit Coverage for Illness or Injury due to Catastrophe	12/08/97
R9-22-509	Transition and Coordination of Member Care	12/08/97
R9-22-510	Transfer of Members	12/08/97
R9-22-511	Fraud or Abuse	12/08/97
R9-22-512	Release of Safeguarded Information by the Administration and Contractors	12/08/97
R9-22-513	Discrimination Prohibition	12/08/97
R9-22-514	Equal Opportunity	12/08/97
R9-22-515	Repealed	12/08/97
R9-22-516	Renumbered	10/01/85
R9-22-517	Renumbered	10/01/85
R9-22-518	Information to Enrolled Members	12/08/97
R9-22-519	Repealed	12/08/97
R9-22-520	Expired	10/09/02
R9-22-521	Program Compliance Audits	12/08/97
R9-22-522	Quality Management/Utilization Management (QM/ UM) Requirements	12/08/97
R9-22-523	Expired	10/09/02
R9-22-524	Continuity of Care	12/08/97
R9-22-525	Repealed	10/01/85
R9-22-526	Renumbered	10/01/85
R9-22-527	Renumbered	10/01/85
R9-22-528	Renumbered	10/01/85
R9-22-529	Renumbered	10/01/85
ARTICLE 6 – RFP AND CONTRACT PROCESS		
R9-22-601	General Provisions	01/10/02
R9-22-602	RFP	01/10/02
R9-22-603	Contract Award	01/10/02
R9-22-604	Contract or Proposal Protests; Appeals	01/10/02
R9-22-605	Waiver of Contractor's Subcontract with Hospitals	01/10/02
R9-22-606	Contract Compliance Sanction	01/10/02

ARTICLE 7 – STANDARDS FOR PAYMENTS		
R9-22-701	Scope of the Administration’s Liability	01/10/02
R9-22-702	Prohibitions Against Charges to Members	07/15/02
R9-22-703	Claims Submission to the Administration	07/15/02
R9-22-704	Transfer of Payments	07/15/02
R9-22-705	Payments by Contractors	12/13/99
R9-22-706	Payments by the Administration for Services Provided to Eligible Persons	09/22/97
R9-22-707	Payments for Newborns	07/15/02
R9-22-708	Payment for services provided to eligible Native Americans residing on reservation	10/01/86
R9-22-709	Contractor’s Liability to Hospitals for the Provision of Emergency and Subsequent Care	01/10/02
R9-22-710	Capped Fee-for-service Payments for Non-hospital Services	09/22/97
R9-22-711	Copayments	07/15/02
R9-22-712	Payments by the Administration for Hospital Services	01/14/97
R9-22-713	Payments Made on Behalf of a Contractor; Recovery of Indebtedness	07/15/02
R9-22-714	Payments to Providers	01/10/02
R9-22-715	Hospital Rate Negotiations	09/22/97
R9-22-716	Specialty Contracts	01/10/02
R9-22-717	Hospital Claims Review	09/22/97
R9-22-718	Impatient Hospital Reimbursement Pilot Program	01/29/97
R9-22-719	Contractor Performance Measure Outcomes	01/10/02
R9-22-720	Reinsurance	01/10/02
ARTICLE 8 – GRIEVANCE AND REQUEST FOR HEARING		
R9-22-801	General Provisions for a Grievance and Request for Hearing	08/07/00
R9-22-802	Grievance and Request for Hearing	08/07/00
R9-22-803	Eligibility Hearing for an Applicant and a Member under R9-22-1435, 9 A.A.C. 22, Article 15 and R9-22-1704	08/07/00
R9-22-804	Eligibility Hearing for an Applicant and a Member under 9 A.A.C. 22, Article 16	08/07/00
Appendix A.	Grievance and Request for Hearing Process	08/07/00
R9-22-805	Repealed	01/31/86
ARTICLE 9 –QUALITY CONTROL		
R9-22-901	General Information	10/01/01
R9-22-902	Pre-Determined Quality Control (PDQL)	10/01/01
R9-22-903	Random Sample	10/01/01
R9-22-904	Targeted Sample	10/01/01
R9-22-905	Negative Case Action Sample	10/01/01
R9-22-906	Management Evaluation Review	10/01/01
R9-22-907	Challenge of Findings	10/01/01
R9-22-908	Coorective Action Plans	10/01/01
R9-22-909	Annual Assessment Period Report	10/01/01
ARTICLE 10 – 1ST AND 3RD PARTY LIABILITY AND RECOVERIES		
R9-22-1001	1 ST and 3 rd Party Liability and Coordination of Benefits	11/07/97

R9-22-1002	1 st and 3 rd Party Liability Monitoring and Compliance	11/07/97
ARTICLE 11 – CIVIL MONETARY PENALTIES AND ASSESSMENTS		
R9-22-1101	Basis for Civil Monetary Penalties and Assessments for Fraudulent Claims	06/09/98
R9-22-1102	Determinations Regarding the Amount of the Penalty and Assessment	06/09/98
R9-22-1103	Notice of Proposed Determination and Rights of Parties	06/09/98
R9-22-1104	Issues and Burden of Proof	06/09/98
ARTICLE 12 – BEHAVIORAL HEALTH SERVICES		
R9-22-1201	General Requirement	10/01/01
R9-22-1202	ADHS and Contractor Responsibilities	10/30/01
R9-22-1203	Eligibility for Covered Services	10/01/01
R9-22-1204	General Service Requirements	10/01/01
R9-22-1205	Scope and Coverage of Behavioral Health Services	10/01/01
R9-22-1206	General Provisions and Standards for Service Providers	10/01/01
R9-22-1207	Standards for Payments	12/13/99
R9-22-1208	Grievance and Request for Hearing Process	08/07/00
ARTICLE 13 – MEMBERS’ RIGHTS AND RESPONSIBILITIES FOR EXPEDITED HEARINGS		
R9-22-1301	General Intent and Definitions	08/07/00
R9-22-1302	Denial of a Request for a Service	08/07/00
R9-22-1303	Reduction, Suspension or Termination of a Service	08/07/00
R9-22-1304	Content of Notice	08/07/00
R9-22-1305	Exceptions from an Advance Notice	08/07/00
R9-22-1306	Notice in a Case of Probable Fraud	09/09/98
R9-22-1307	Expedited Hearing Process	08/07/00
R9-22-1308	Maintenance of Records	08/07/00
R9-22-1309	Member Handbook	08/07/00
ARTICLE 14 – AHCCCS MEDICAL COVERAGE FOR FAMILIES AND INDIVIDUALS		
R9-22-1401	General Information	10/01/01
R9-22-1402	Ineligible Person	10/01/01
R9-22-1403	Agency Responsible for Determining Eligibility	10/01/01
R9-22-1404	Confidentiality	10/01/01
R9-22-1405	Application Process	10/01/01
R9-22-1406	Applicant and Member Responsibility	10/01/01
R9-22-1407	Withdrawal of Application	10/01/01
R9-22-1408	Eligibility Interview or Home Visit	10/01/01
R9-22-1409	Withdrawal from AHCCCS Medical Coverage	10/01/01
R9-22-1410	Verification of Eligibility Information	10/01/01
R9-22-1411	Timeframes, Approval, or Denial of the Application	10/01/01
R9-22-1412	Review of Eligibility	10/01/01
R9-22-1413	Notice of Discontinuance Action	10/01/01
R9-22-1414	Effective Date of Eligibility	10/01/01
R9-22-1415	Operation of Law	10/01/01
R9-22-1416	Social Security Number	10/01/01
R9-22-1417	State of Residency	10/01/01

R9-22-1418	Citizenship and Immigrant Status	10/01/01
R9-22-1419	Income Eligibility Criteria	10/01/01
R9-22-1420	Eligibility for a Family	10/01/01
R9-22-1421	Eligibility for a Person Not Eligible as a Family	10/01/01
R9-22-1422	Eligibility for a Newborn	10/01/01
R9-22-1423	Extended Medical Coverage for a Pregnant Woman	10/01/01
R9-22-1424	Family Planning Services Extension Program	10/01/01
R9-22-1425	Young Adult Transitional Insurance	10/01/01
R9-22-1426	Special Groups for Children	10/01/01
R9-22-1427	Eligibility for a Person with Medical Bills whose Income is over 100 Percent FPL	10/01/01
R9-22-1428	MED Family Unit	10/01/01
R9-22-1429	MED Income Eligibility Requirements	10/01/01
R9-22-1430	MED Resource Eligibility Requirements	10/01/01
R9-22-1431	MED Effective Date of Eligibility	10/01/01
R9-22-1432	MED Eligibility Period	10/01/01
R9-22-1433	Eligibility Appeals	10/01/01
R9-22-1434	State Emergency Services Program (SESP)	12/01/01
R9-22-1435	Repealed	10/01/01
R9-22-1436	Repealed	10/01/01
ARTICLE 15 – AHCCCS MEDICAL COVERAGE FOR PEOPLE WHO ARE AGED, BLIND OR DISABLED		
R9-22-1501	General Information	10/01/01
R9-22-1502	General Eligibility Criteria	10/01/01
R9-22-1503	Financial Eligibility Criteria	10/01/01
R9-22-1504	Eligibility for a Person who is Aged, Blind, or Disabled	10/01/01
R9-22-1505	Eligibility for Special Groups	10/01/01
R9-22-1506	Repealed	10/01/01
R9-22-1507	Repealed	10/01/01
R9-22-1508	Repealed	10/01/01
ARTICLE 16 - REPEALED		
ARTICLE 17 – ENROLLMENT		
R9-22-1701	Enrollment of a Member with an AHCCCS Contractor	12/01/01
R9-22-1702	Effective Date of Enrollment with a Contractor and Notification to the Contractor	10/01/01
R9-22-1703	Newborn Enrollment	10/01/01
R9-22-1704	Guaranteed Enrollment Period	10/30/01
ARTICLE 18 - RESERVED		
ARTICLE 19 - FREEDOM TO WORK		
R9-22-1901	General Freedom to Work Requirements	01/01/2003
R9-22-1902	General Administration Requirements	01/01/2003
R9-22-1903	Application for Coverage	01/01/2003
R9-22-1904	Notice of Approval or Denial	01/01/2003

R9-22-1905	Reporting and Verifying Changes	01/01/2003
R9-22-1906	Actions That Result From a Redetermination or Change	01/01/2003
R9-22-1907	Notice of Adverse Action Requirements	01/01/2003
R9-22-1908	Request For Hearing	01/01/2003
R9-22-1909	Social Security Number	01/01/2003
R9-22-1910	State Residency	01/01/2003
R9-22-1911	Citizenship and Immigrant Status	01/01/2003
R9-22-1912	Age	01/01/2003
R9-22-1913	Premium	01/01/2003
R9-22-1914	Income	01/01/2003
R9-22-1915	Institutionalized Person	01/01/2003
R9-22-1916	Non Payment of Premium	01/01/2003
R9-22-1917	Applicant and Member Responsibility	01/01/2003
R9-22-1918	Additional Eligibility Criteria for the Basic Coverage Group	01/01/2003
R9-22-1919	Additional Eligibility Criteria for the Medically Improved Group	01/01/2003
R9-22-1920	Premium Amount	01/01/2003
R9-22-1921	Enrollment	01/01/2003
R9-22-1922	Redetermination of Eligibility	01/01/2003
ARTICLE 20 - BREAST & CERVICAL CANCER TREATMENT PROGRAM		
R9-22-2001	General Requirements	12/06/01
R9-22-2002	Treatment	12/06/01
R9-22-2003	Eligibility Criteria	16/06/01
R9-22-2004	Title XIX Application Process	12/06/01
R9-22-2005	Approval, Denial, or Discontinuance of Eligibility	12/06/01
R9-22-2006	Effective Date of Eligibility	12/06/01
R9-22-2007	Redetermination of Eligibility	12/06/01

TITLE 9. HEALTH SERVICES CHAPTER 27. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) HEALTH CARE FOR PRIVATE EMPLOYER GROUPS/AHCCCS ADMINISTERED <i>The rules in this Chapter set forth standards for the AHCCCS Health Care Group program, under the authority of A.R.S. Title 36, Chapter 29, Article 1. Specific subjects of these rules are indicated in the following table of contents.</i>		
Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-27-101	Location of Definitions	01/31/03
ARTICLE 2 – SCOPE OF SERVICES		
R9-27-201	Scope of Services	01/31/03
R9-27-202	Covered Services	01/31/03
R9-27-203	Exclusions and Limitations	01/31/03
R9-27-204	Out-of-service Area Coverage	01/31/03
R9-27-205	Outpatient Health Services	01/31/03
R9-27-206	Laboratory, Radiology, and Medical Imaging Services	08/07/00
R9-27-207	Pharmaceutical Services	08/07/00
R9-27-208	Inpatient Hospital Services	01/31/03
R9-27-209	Emergency Medical Services	01/31/03
R9-27-210	Pre-existing Conditions	01/31/03
R9-27-211	Repealed	07/15/97
ARTICLE 3 – ELIGIBILITY AND ENROLLMENT		
R9-27-301	Eligibility Criteria for Employer Groups	01/31/03
R9-27-302	Eligibility Criteria for Employee Members	01/31/03
R9-27-303	Eligibility Criteria for Dependents	01/31/03
R9-27-304	Repealed	08/07/00
R9-27-305	Health History Form	08/07/00
R9-27-306	Effective Date of Coverage	01/31/03
R9-27-307	Open Enrollment of Employee Members	01/31/03
R9-27-308	Enrollment of Newborns	01/31/03
R9-27-309	Enrollment of Newly Eligible Employee and Dependent Due to Loss of Own Coverage	08/07/00
R9-27-310	Denial and Termination of Enrollment	01/31/03
ARTICLE 4 – CONTRACTS, ADMINISTRATION, AND STANDARDS		
R9-27-401	General	01/31/03
R9-27-402	Contract and GSA's	01/31/03
R9-27-403	Repealed	01/31/03
R9-27-404	Repealed	01/31/03
R9-27-405	Contract and GSA Terminations	01/31/03
R9-27-406	Continuation Coverage	01/31/03
R9-27-407	Repealed	01/31/03
R9-27-408	Contract Compliance Sanction Alternative	01/31/03

ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-27-501	Availability and Accessibility of Services	08/07/00
R9-27-502	Repealed	01/31/03
R9-27-503	Marketing and Discrimination	01/31/03
R9-27-504	Approval of Advertisements and Marketing Material	08/07/00
R9-27-505	Member Records and Systems	08/07/00
R9-27-506	Fraud or Abuse	01/31/03
R9-27-507	Release of Safeguarded Information	01/31/03
R9-27-508	Repealed	07/15/97
R9-27-509	Information to Enrolled Members	08/07/00
R9-27-510	Discrimination Prohibition	01/31/03
R9-27-511	Equal Opportunity	08/07/00
R9-27-512	Periodic Reports and Information	08/07/00
R9-27-513	Medical Audits	08/07/00
R9-27-514	HCG Plan's Internal Quality Management and Utilization Review System	08/07/00
R9-27-515	Continuity of Care	08/07/00
R9-27-516	Financial Resources	08/07/00
ARTICLE 6 – GRIEVANCE AND REQUEST FOR HEARING		
R9-27-601	Grievance and Request for Hearing	08/07/00
R9-27-602	Repealed	07/15/97
R9-27-603	Repealed	07/15/97
ARTICLE 7 – STANDARD FOR PAYMENTS		
R9-27-701	HCGA Liability; Payments to HCG Plans	08/07/00
R9-27-702	Prohibition Against Charges to Members	01/31/03
R9-27-703	Payments by HCG Plans	08/07/00
R9-27-704	HCG Plan's Liability to Noncontracting Hospitals for the Provision of Emergency and Subsequent Care to Enrolled Members	01/31/03
R9-27-705	Copayments	08/07/00
R9-27-706	Payments by Employer Groups	01/31/03
R9-27-707	Reinsurance	01/31/03
ARTICLE 8 – COORDINATION OF BENEFITS		
R9-27-801	Priority of Benefit Payment	01/31/03

TITLE 9. HEALTH SERVICES
CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ARIZONA LONG-TERM CARE SYSTEM

The rules in this Chapter set forth standards for the AHCCCS Long Term Care program, under the authority of A.R.S. Title 36, Chapter 29, Article 2. Specific subjects of these rules are indicated in the following table of contents.

Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-28-101	General Definitions	07/15/02
R9-28-102	Covered Services Related Definitions	06/09/00
R9-28-103	Pre-admission Screening Related Definitions	06/09/00
R9-28-104	Eligibility and Enrollment Related Definitions	06/09/00
R9-28-105	Program Contractor and Provider Standards Related Definitions	02/08/00
R9-28-106	Request for Proposals and Contract Process Related Definitions	02/08/00
R9-28-107	Standards for Payments Related Definitions	06/09/00
R9-28-108	Grievance and Request for Hearing Process Related Definitions	08/07/00
R9-28-109	1 st and 3 rd party Liability Related Definitions	12/8/97
R9-28-110	Reserved	N/A
R9-28-111	Behavioral Health Services Related Definitions	12/13/99
ARTICLE 2 – COVERED SERVICES		
R9-28-201	General Requirements	06/09/02
R9-28-202	Medical Services	06/09/02
R9-28-203	Repealed	09/22/97
R9-28-204	Institutional Services	06/09/02
R9-28-205	Home and Community Based Services (HCBS)	06/09/02
R9-28-206	ALTCS Services that may be Provided to Member Residing in either an Institutional or HCBS Settings	06/09/02
ARTICLE 3 – PRE-ADMISSION SCREENING (PAS)		
R9-28-301	Definitions	12/07/01
R9-28-302	General Provisions	12/07/01
R9-28-303	Pre-admission Screening (PAS) Process	12/07/01
R9-28-304	Pre-admission Screening Criteria for an Applicant or Member who is Elderly and Physically Disabled (EPD)	12/07/01
R9-28-305	Pre-Screening Criteria for an Applicant or Member who is Developmentally Disabled (DD)	12/07/01
R9-28-306	Reassessments	12/07/01
R9-28-307	Transitional Program for a Member who is Elderly and Physically Disabled (EPD) or Developmentally Disabled (DD)	12/07/01
ARTICLE 4 – ELIGIBILITY AND ENROLLMENT		
R9-28-401	General	10/01/01
R9-28-402	Categorical Requirements and Coverage Groups	10/01/01
R9-28-403	State Residency	01/06/99
R9-28-404	Citizenship and Qualified Alien Status	01/06/99
R9-28-405	Social Security Enumeration	01/06/99
R9-28-406	ALTCS Living Arrangements	10/01/01
R9-28-407	Resource Criteria for Eligibility	10/01/01
R9-28-408	Income Criteria for Eligibility	10/01/01

R9-28-409	Transfer of Assets	01/06/99
R9-28-410	Community Spouse	01/06/99
R9-28-411	Changes, Redeterminations, and Notices	01/06/99
R9-28-412	General Enrollment	02/08/00
R9-28-413	Enrollment with an EPD Program Contractor	02/08/00
R9-28-414	Enrollment with the DD Program Contractor	02/08/00
R9-28-415	Enrollment with a Tribal Program Contractor	02/08/00
R9-28-416	Enrollment with the FFS Program	10/01/01
R9-28-417	Notification Requirements	02/08/00
R9-28-418	Disenrollment	02/08/00
ARTICLE 5 – PROGRAM CONTRACTOR AND PROVIDER STANDARDS		
R9-28-501	Repealed	02/08/00
R9-28-502	Long-term Care Provider Requirements	12/08/97
R9-28-503	Licensure and Certification for Long-term Care Institutional Facilities	12/08/97
R9-28-504	Standards of Participation, Licensure, and Certification for HCBS Providers	03/04/99
R9-28-505	Standards, Licensure, and Certification for Providers of Hospital and Medical Services	12/8/97
R9-28-506	Reserved	N/A
R9-28-507	Program Contractor General Requirements	02/08/00
R9-28-508	Repealed	02/08/00
R9-28-509	Reserved	N/A
R9-28-510	Case Management	12/08/97
R9-28-511	Quality Management/Utilization Management (QM/UM) Requirements	03/04/99
R9-28-512	Expired	10-09-02
R9-28-513	Program Compliance Audits	12/08/97
R9-28-514	Release of Safeguarded Information by the Administration and Contractors	12/08/97
R9-28-515	Discrimination Prohibition and Equal Opportunity	10/01/88
ARTICLE 6 – RFP AND CONTRACT PROCESS		
R9-28-601	General Provision	01/10/02
R9-28-602	RFP	01/10/02
R9-28-603	Contract Award	01/10/02
R9-28-604	Contract or Proposal Protests; Appeals	01/10/02
R9-28-605	Waivers of Contractor's Subcontract with Hospitals	01/10/02
R9-28-606	Contract Compliance Sanction	01/10/02
R9-28-607	Repealed	01/10/02
R9-28-608	Repealed	01/10/02
R9-28-609	Repealed	02/08/00
R9-28-610	Repealed	02/08/00

ARTICLE 7 – STANDARDS FOR PAYMENTS		
R9-28-701	Scope of the Administration’s Liability	01/10/02
R9-28-702	Prohibition Against Charges to Member	07/15/02
R9-28-703	Claims	07/15/02
R9-28-704	Transfer of Payments	07/15/02
R9-28-705	Payments by Program Contractors	03/04/99
R9-28-706	Payments by Administration for Services Provided to Eligible Persons	09/22/97
R9-28-707	Contractor’s Liability to Hospitals for the Provision of Emergency and Subsequent Care	01/10/02
R9-28-708	Capped Fee-for-Service Payment	11/05/93
R9-28-709	Reinsurance	07/15/02
R9-28-710	Repealed	01/10/02
R9-28-711	Payments Made on Behalf of a Program Contractor; Recovery of Funds; Postpayment Reviews	07/15/02
R9-28-712	County of Fiscal Responsibility	07/15/02
R9-28-713	Hospital Rate Negotiations	02/08/00
R9-28-714	Payment to Providers	01/10/02
R9-28-715	Specialty Contracts	01/10/02
ARTICLE 8 – GRIEVANCE AND REQUEST FOR HEARING		
R9-28-801	General Provisions for a Grievance and a Request for Hearing	08/07/00
R9-28-802	Grievance	08/07/00
R9-28-803	Eligibility Hearing for an Applicant or a Member under 9A.A.C. 28, Article 4	08/07/00
R9-28-804	Repealed	08/11/97
ARTICLE 9 – 1ST AND 3RD PARTY LIABILITY AND RECOVERIES		
R9-28-901	1 st and 3 rd Party Liability and Coordination of Benefits	11/07/97
R9-28-902	1 st and 3 rd Party Liability Monitoring and Compliance	11/07/97
R9-28-903	Reserved	N/A
R9-28-904	Reserved	N/A
R9-28-905	Reserved	N/A
R9-28-906	Recoveries	11/07/97
ARTICLE 10 – CIVIL MONETARY PENALTIES AND ASSESSMENTS		
R9-28-1001	Basis for Civil Monetary Penalties and Assessments for Fraudulent Claims	06/09/98
R9-28-1002	Repealed	06/09/98
R9-28-1003	Repealed	06/09/98
R9-28-1004	Repealed	06/09/98
ARTICLE 11 – BEHAVIORAL HEALTH SERVICES		
R9-28-1101	General Requirements	10/01/01
R9-28-1102	Contractor Responsibilities	10/01/01
R9-28-1103	Eligibility for Covered Services	10/01/01
R9-28-1104	General Service Requirements	10/01/01
R9-28-1105	Scope of Behavioral Health Services	02/12/02
R9-28-1106	General Provisions and Standards for Service Providers	10/01/01

R9-28-1107	Standards for Payments	08/07/00
R9-28-1108	Grievance and Request for Hearing Process	08/07/00
ARTICLE 12 – MEMBERS' RIGHTS AND RESPONSIBILITIES FOR EXPEDITED HEARINGS		
R9-28-1201	Rights and Responsibilities for Expedited Hearings	08/07/00
ARTICLE 13 – FREEDOM TO WORK		
R9-28-1301	General Freedom to Work Requirements	01/01/03
R9-28-1302	General Administration Requirements	01/01/03
R9-28-1303	Application for Coverage	01/01/03
R9-28-1304	Notice of Approval or Denial	01/01/03
R9-28-1305	Reporting and Verifying Changes	01/01/03
R9-28-1306	Actions that Result From a Redetermination or Change	01/01/03
R9-28-1307	Notice of Adverse Action Requirements	01/01/03
R9-28-1308	Request for Hearing	01/01/03
R9-28-1309	Social Security Number	01/01/03
R9-28-1310	State Residency	01/01/03
R9-28-1311	Citizenship and Immigrant Status	01/01/03
R9-28-1312	Age	01/01/03
R9-28-1313	Premium	01/01/03
R9-28-1314	Income	01/01/03
R9-28-1315	Living Arrangement	01/01/03
R9-28-1316	Institutionalized Person	01/01/03
R9-28-1317	Medical Eligibility	01/01/03
R9-28-1318	Non Payment of Premium	01/01/03
R9-28-1319	Applicant and Member Responsibility	01/01/03
R9-28-1320	Additional Eligibility Criteria for the Basic Coverage Group	01/01/03
R9-28-1321	Share of Cost	01/01/03
R9-28-1322	Premium Amount	01/01/03
R9-28-1323	Enrollment	01/01/03
R9-28-1324	Redetermination of Eligibility	01/01/03

TITLE 9. HEALTH SERVICES CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) QUALIFIED MEDICARE BENEFICIARY (QMB) <i>The rules in this Chapter set forth standards for the AHCCCS QMB program, under the authority of A.R.S. Title 36, Chapter 29, Article 3.. Specific subjects of these rules are indicated in the following table of contents.</i>		
Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-29-101	Location of Definitions	10/01/01
ARTICLE 2 – ELIGIBILITY AND ENROLLMENT		
R9-29-201	General Provisions of QMB Eligibility	04/14/98
R9-29-202	QMB Enrollment	04/14/98
R9-29-203	QMB Discontinuance	04/14/98
R9-29-204	Repealed	04/14/98
ARTICLE 3 – COVERED BENEFITS AND SERVICES		
R9-29-301	Qualified Medicare Beneficiary Only	04/14/98
R9-29-302	Qualified Medicare Beneficiary with Dual Eligibility	04/14/98
ARTICLE 4 – CONTRACTOR, PROVIDER , NON-PROVIDER, AND NON-CONTRACTING PROVIDER REQUIREMENTS		
R9-29-401	Contractor, Provider, Nonprovider, and Noncontracting Provider Requirements	04/14/98
R9-29-402	Repealed	04/14/98
R9-29-403	Repealed	04/14/98
R9-29-404	Repealed	04/14/98
ARTICLE 5 – GRIEVANCE AND REQUEST FOR HEARING		
R9-29-501	General Provisions for a Grievance and a Request for Hearing	08/07/00
R9-29-502	Grievance	08/07/00
R9-29-503	Eligibility Hearing for an Applicant or a Member under 9 A.A.C. 29, Article 2	08/07/00
R9-29-504	Repealed	04/14/98
ARTICLE 6 – 1ST AND 3RD –PARTY LIABILITY AND COORDINATION OF BENEFITS		
R9-29-601	1 st and 3 rd party Liability and Coordination of Benefits	04/14/98
R9-29-602	1 st and 3 rd party Liability Monitoring and Compliance	04/14/98

TITLE 9. HEALTH SERVICES
CHAPTER 30. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
PREMIUM SHARING PROGRAM

The rules in this Chapter set forth standards for the AHCCCS Premium Sharing Program, under the authority of A.R.S. Title 36, Chapter 29, Article 1. Specific subjects of these rules are indicated in the following table of contents.

Rule	Title	Effective Date
ARTICLE 1 – DEFINITIONS		
R9-30-101	Location of Definitions	10/01/02
R9-30-102	Scope of Services Related Definitions	10/01/01
R9-30-103	Eligibility and Enrollment Related Definitions	10/01/02
R9-30-104	Reserved	N/A
R9-30-105	Reserved	N/A
R9-30-106	Grievance and Request for Hearings Process Related Definitions	10/01/02
R9-30-107	Payment Responsibilities Related Definitions	10/01/02
ARTICLE 2 – SCOPE OF SERVICES		
R9-30-201	General Requirements	10/01/02
R9-30-202	Reserved	N/A
R9-30-203	Reserved	N/A
R9-30-204	Inpatient General Hospital Services	10/01/01
R9-30-205	Primary Care Provider Services	10/01/02
R9-30-206	Organ and Tissue Transplantation Services	10/01/02
R9-30-207	Dental Services	10/01/02
R9-30-208	Laboratory, Radiology, and Medical Imaging Services	10/01/01
R9-30-209	Pharmaceutical Services	10/01/01
R9-30-210	Emergency Medical Services and Emergency Behavioral Health Services	10/01/01
R9-30-211	Transportation Services	10/01/02
R9-30-212	Medical Supplies, Durable Equipment, and Orthotic and Prosthetic Devices	10/01/02
R9-30-213	Health Risk Assessment and Screening Services	10/01/02
R9-30-214	Reserved	N/A
R9-30-215	Other Medical Professional Services	10/01/01
R9-30-216	Nursing Facility Services	10/01/01
R9-30-217	Behavioral Health Services	10/01/01
ARTICLE 3 – ELIGIBILITY AND ENROLLMENT		
R9-30-301	General Requirements	10/01/02
R9-30-302	Time-frames for Determining Eligibility	10/01/02
R9-30-303	Conditions of Eligibility	10/01/02
R9-30-304	Enrollment	10/01/02
R9-30-305	Disenrollment	10/01/02
R9-30-306	Redetermination	10/01/02
ARTICLE 4 – REPEALED		

ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-30-501	General Authority	10/01/02
R9-30-502	Availability and Accessibility of Services	10/01/01
R9-30-503	Reserved	N/A
R9-30-504	Marketing	10/01/01
R9-30-505	Reserved	N/A
R9-30-506	Reserved	N/A
R9-30-507	Member Record	10/01/02
R9-30-508	Reserved	N/A
R9-30-509	Transition and Coordination of Member Care	10/01/02
R9-30-510	Transfer of a Member	10/01/01
R9-30-511	Fraud and Abuse	10/01/02
R9-30-512	Release of Safeguarded Information by the PSA and a Contractor	10/01/02
R9-30-513	Discrimination Prohibition	10/01/02
R9-30-514	Equal Opportunity	10/01/02
R9-30-515	Reserved	N/A
R9-30-516	Reserved	N/A
R9-30-517	Reserved	N/A
R9-30-518	Information to an Enrolled Member	10/01/01
R9-30-519	Reserved	N/A
R9-30-520	Financial Statements, Periodic Reports, and Information	10/01/02
R9-30-521	Program Compliance Audits	10/01/02
R9-30-522	Quality Management/Utilization Management (QM/UM) Requirements	10/01/02
R9-30-523	Financial Resources	10/01/02
R9-30-524	Continuity of Care	10/01/01
ARTICLE 6 – GRIEVANCE AND REQUEST FOR HEARING		
R9-30-601	General Provisions for a Grievance and a Request for Hearing	10/01/02
R9-30-602	Grievance	10/01/02
R9-30-603	Eligibility Hearing for an Applicant and a Member	10/01/02
Exhibit A.	Grievance and Request for Hearing Process	08/04/00
ARTICLE 7 – PAYMENT RESPONSIBILITIES		
R9-30-701	A Member's Payment Responsibilities	10/01/02
R9-30-702	The Administration's Scope of Liability: The Administration's Payment Responsibility to Contractors	10/01/02
R9-30-703	Contractor's and Provider's Claims and Payment Responsibilities	10/01/02
ARTICLE 8 – MEMBERS' RIGHTS AND RESPONSIBILITIES FOR EXPEDITED HEARINGS		
R9-30-801	General Intent and Definitions	10/01/01
R9-30-802	Denial of a Request for a Service	10/01/01
R9-30-803	Reduction, Suspension, or Termination of a Service	10/01/01
R9-30-804	Content of Notice	10/01/01
R9-30-805	Exceptions from an Advance Notice	10/01/01
R9-30-806	Notice in a Case of Probable Fraud	10/01/01
R9-30-807	Expedited Hearing Process	10/01/02
R9-30-808	Maintenance of Records	10/01/01
R9-30-809	Member Handbook	10/01/01

ARTICLE 9 – CONTRACT PROCESS		
R9-30-901	General Provisions	10/01/02
R9-30-902	Contract Compliance Sanction	10/01/02
R9-30-903	Contract Protest, Grievance and Request for Hearing	10/01/02

TITLE 9. HEALTH SERVICES
CHAPTER 31. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
CHILDREN'S HEALTH INSURANCE PROGRAM

The rules in this Chapter set forth standards for the AHCCCS Children's Health Insurance program, under the authority of A.R.S. Title 36, Chapter 29, Article 4. Specific subjects of these rules are indicated in the following table of contents.

ARTICLE 1 – DEFINITIONS

R9-31-101	Location of Definitions	01/31/03
R9-31-102	Scope of Services Related Definitions	10/23/98
R9-31-103	Eligibility and Enrollment Related Definitions	12/07/01
R9-31-104	Reserved	N/A
R9-31-105	General Provisions and Standards	10/23/98
R9-31-106	Request for Proposal (RFP) Related Definitions	09/10/99
R9-31-107	Standards for Payments Related Definitions	07/15/02
R9-31-108	Grievance and Request for Hearings Related Definitions	08/04/00
R9-31-109	Reserved	N/A
R9-31-110	1 st and 3 rd Party Liability and Recoveries Related Definitions	10/23/98
R9-31-111	Reserved	N/A
R9-31-112	Covered Behavioral Health Services Related Definitions	10/01/01
R9-31-113	Repealed	08/04/00
R9-31-114	Reserved	N/A
R9-31-115	Reserved	N/A
R9-31-116	Services for Native Americans Related Definitions	07/15/02

ARTICLE 2 – SCOPE OF SERVICES

R9-31-201	General Requirements	05/09/02
R9-31-202	Reserved	N/A
R9-31-203	Reserved	N/A
R9-31-204	Inpatient General Hospital Services	05/09/02
R9-31-205	Attending Physician, Practitioner, and Primary Care Provider Services	05/09/02
R9-31-206	Organ and Tissue Transplantation Services	10/23/98
R9-31-207	Dental Services	05/09/02
R9-31-208	Laboratory, Radiology, and Medical Imaging Services	05/09/02
R9-31-209	Pharmaceutical Services	05/09/02
R9-31-210	Emergency Medical Services	10/01/01
R9-31-211	Transportation Services	12/07/01
R9-31-212	Medical Supplies, Durable Medical Equipment, and Orthotic and Prosthetic Devices	05/09/02
R9-31-213	Health Risk Assessment and Screening Services	12/07/01
R9-31-214	Reserved	N/A
R9-31-215	Other Medical Professional Services	05/09/02
R9-31-216	NF, Alternative HCBS Setting, or HCBS	05/09/02

ARTICLE 3 – ELIGIBILITY AND ENROLLMENT

R9-31-301	General Requirements	10/23/98
R9-31-302	Applications	12/07/01
R9-31-303	Eligibility Criteria	12/07/01

R9-31-304	Income Eligibility	12/07/01
R9-31-305	Verification	10/23/98
R9-31-306	Enrollment	12/07/01
R9-31-307	Guaranteed Enrollment	12/07/01
R9-31-308	Changed and Redeterminations	12/07/01
R9-31-309	Newborn Eligibility	09/10/99
R9-31-310	Notice Requirements	12/07/01
ARTICLE 4 – REPEALED		
ARTICLE 5 – GENERAL PROVISIONS AND STANDARDS		
R9-31-501	General Provisions	10/23/98
R9-31-502	Availability and Accessibility of Service	09/10/99
R9-31-503	Repealed	07/15/02
R9-31-504	Marketing; Prohibition against Inducements; Misrepresentations; Discrimination; Sanctions	12/07/01
R9-31-505	Approval of Advertisements and Marketing Materials	10/23/98
R9-31-506	Reserved	N/A
R9-31-507	Member Record	12/07/01
R9-31-508	Limitation of Benefit Coverage for Illness or Injury due to Catastrophe	10/23/98
R9-31-509	Transition and Coordination of Member Care	12/07/01
R9-31-510	Transfer of Members	10/23/98
R9-31-511	Fraud or Abuse	12/07/01
R9-31-512	Release of Safeguarded Information by the Administration and Contractors	10/23/98
R9-31-513	Discrimination Prohibition	12/07/01
R9-31-514	Equal Opportunity	10/23/98
R9-31-515	Reserved	N/A
R9-31-516	Reserved	N/A
R9-31-517	Reserved	N/A
R9-31-518	Information to Enrolled Members	10/23/98
R9-31-519	Reserved	N/A
R9-31-520	Financial Statements, Periodic Reports, and Information	10/23/98
R9-31-521	Program Compliance Audits	12/07/01
R9-31-522	Quality Management/Utilization Management (QM/UM) Requirements	10/23/98
R9-31-523	Financial Resources	10/23/98
R9-31-524	Continuity of Care	10/23/98
R9-31-525	Reserved	N/A
R9-31-526	Reserved	N/A
R9-31-527	Reserved	N/A
R9-31-528	Reserved	N/A
R9-31-529	Reserved	N/A
ARTICLE 6 – REQUEST FOR PROPOSALS (RFP)		
R9-31-601	General Provisions	01/10/02
R9-31-602	RFP	01/10/02
R9-31-603	Contract Award	01/10/02
R9-31-604	Contract or Proposal Protests; Appeals	01/10/02
R9-31-605	Waiver of Contractor’s Subcontract with Hospitals	01/10/02

R9-31-606	Contract Compliance Sanction	01/10/02
ARTICLE 7 – STANDARDS FOR PAYMENTS		
R9-31-701	Scope of the Administration’s Liability	01/10/02
R9-31-702	Prohibitions Against Charges to Members	07/15/02
R9-31-703	Claims	07/15/02
R9-31-704	Transfer of Payments	07/15/02
R9-31-705	Payments by Contractors	09/10/99
R9-31-706	Reserved	N/A
R9-31-707	Payments for Newborns	10/23/98
R9-31-708	Reserved	N/A
R9-31-709	Contractor’s Liability to Hospitals for the Provision of Emergency and Subsequent Care	01/10/02
R9-31-710	Reserved	N/A
R9-31-711	Copayments and Premiums	07/15/02
R9-31-712	Reserved	N/A
R9-31-713	Payments Made on Behalf of a Contractor; Recovery of Indebtedness	07/15/02
R9-31-714	Payments to Providers	01/10/02
R9-31-715	Hospital Rate Negotiations	10/23/98
R9-31-716	Specialty Contracts	01/10/02
R9-31-717	Hospital Claims Review	09/10/99
R9-31-718	Contractor Performance Measure Outcomes	01/10/02
R9-31-719	Reinsurance	07/15/02
ARTICLE 8 – GRIEVANCE AND REQUEST FOR HEARING		
R9-31-801	General Provisions for a Grievance and Request for Hearing	08/04/00
R9-31-802	Grievance	08/04/00
R9-31-803	Eligibility Hearing for an Applicant and a Member under 9A.A.C.31, Article 3	08/04/00
R9-31-804	Repealed	08/04/00
Exhibit A.	Grievance and Request for Hearing Process	08/04/00
ARTICLE 9 – QUALITY CONTROL		
R9-31-901	General Provisions	10/23/98
ARTICLE 10 – 1ST AND 3RD–PARTY LIABILITY AND RECOVERIES		
R9-31-1001	1 st -and 3 rd –Party Liability and Coordination of Benefits	09/10/99
R9-31-1002	1 st -and 3 rd Party Liability Monitoring and Compliance	10/23/98
ARTICLE 11 – CIVIL MONETARY PENALTIES AND ASSESSMENTS		
R9-31-1101	Basis for Civil Monetary Penalty and Assessments for Fraudulent Claims	10/23/98
R9-31-1102	Determinations Regarding the Amount of Penalty and Assessment	10/23/98
R9-31-1103	Notice of Proposed Determination and Rights of Parties	10/23/98
R9-31-1104	Issues and Burden of Proof	10/23/98

ARTICLE 12 – BEHAVIORAL HEALTH SERVICES		
R9-31-1201	General Requirements	10/01/01
R9-31-1202	ADHS and Contractor Responsibilities	10/01/01
R9-31-1203	Eligibility for Covered Services	10/01/01
R9-31-1204	General Service Requirements	10/01/01
R9-31-1205	Scope of Behavioral Health Services	12/07/01
R9-31-1206	General Provisions and Standards for Service Providers	10/01/01
R9-31-1207	Standards for Payments	12/07/01
R9-31-1208	Grievance and Request for Hearings Process	08/04/00
ARTICLE 13 – MEMBERS’ RIGHTS AND RESPONSIBILITIES FOR EXPEDITED HEARINGS		
R9-31-1301	General Provisions	08/04/00
R9-31-1302	Denial of a Request for a Service	08/04/00
R9-31-1303	Reduction, Suspension, of Termination of a Service	08/04/00
R9-31-1304	Content of Notice	08/04/00
R9-31-1305	Exceptions from an Advance Notice	08/04/00
R9-31-1306	Notice in a Case of Probable Fraud	08/04/00
R9-31-1307	Expedited Hearing Process	08/04/00
R9-31-1308	Maintenance of Records	08/04/00
R9-31-1309	Member Handbook	08/04/00
ARTICLE 14 – PREMIUMS		
R9-31-1401	Purpose	01/31/03
R9-31-1402	Premium Amount for a Member Who is a Child Determined Eligible under Article 3 of this Chapter	01/31/03
R9-31-1403	Repealed	01/31/03
R9-31-1404	Hardship Exemption for a Member Who is a Child Determined Eligible under Article 3 of this Chapter	01/31/03
R9-31-1405	Repealed	01/31/03
R9-31-1406	Repealed	01/31/03
R9-31-1407	Repealed	01/31/03
R9-31-1408	Premium Amount for a Member who is a Parent Determined Eligible under Article 17 of this Chapter	01/31/03
R9-31-1409	Payment Due Date	01/31/03
R9-31-1410	Payment Received Date	01/31/03
R9-31-1411	Late Payment	01/31/03
R9-31-1412	Payment Type	01/31/03
R9-31-1413	Returned Check	01/31/03
R9-31-1414	Payment in Advance	01/31/03
R9-31-1415	Payment Reimbursement	01/31/03
R9-31-1416	Allocation of Payment for an Eligible Member	01/31/03
R9-31-1417	Premium Change	01/31/03
R9-31-1418	Discontinuance for Failure to Pay Premium	01/31/03
R9-31-1419	Premium During the Grievance and Request for Hearing Process	01/31/03
ARTICLE 15 – RESERVED		

ARTICLE 16 – SERVICES FOR NATIVE AMERICANS		
R9-31-1601	General Requirements	12/07/01
R9-31-1602	General Requirements for Scope of Services	12/07/01
R9-31-1603	Inpatient General Hospital Services	05/09/02
R9-31-1604	Physician and Primary Care Physician and Practitioner Services	10/23/98
R9-31-1605	Organ and Tissue Transplantation Services	10/23/98
R9-31-1606	Dental Services	10/23/98
R9-31-1607	Laboratory, Radiology, and Medical Imaging Services	10/23/98
R9-31-1608	Pharmaceutical Services	05/09/02
R9-31-1609	Emergency Services	10/23/98
R9-31-1610	Transportation Services	12/07/01
R9-31-1611	Medical Supplies, Durable Medical Equipment, and Orthotic and Prosthetic Devices	05/09/02
R9-31-1612	Health Risk Assessment and Screening Services	05/09/02
R9-31-1613	Other Medical Professional Services	05/09/02
R9-31-1614	NF, Alternative HCBS Setting or HCBS	05/09/02
R9-31-1615	Eligibility and Enrollment	10/23/98
R9-31-1616	Standards for Payments	10/23/98
R9-31-1617	Prior Authorization	05/09/02
R9-31-1618	Claims Submission to the Administration	07/15/02
R9-31-1619	Hospital Claims Review	10/23/98
R9-31-1620	Prohibitions Against Charges to Members	07/15/02
R9-31-1621	Transfer of Payments	07/15/02
R9-31-1622	The Administration's Liability to Hospitals for the Provision of Emergency and Subsequent Care	12/07/01
R9-31-1623	Repealed	07/15/02
R9-31-1624	Specialty Contracts	10/23/98
R9-31-1625	Behavioral Health Services	12/07/01
ARTICLE 17 – ELIGIBILITY AND ENROLLMENT FOR A PARENT		
R9-31-1701	General	01/01/03
R9-31-1702	Application	01/01/03
R9-31-1703	Parent Eligibility Criteria	01/01/03
R9-31-1704	Income	01/01/03
R9-31-1705	Citizenship	01/01/03
R9-31-1706	Residency	01/01/03
R9-31-1707	Social Security Number (SSN)	01/01/03
R9-31-1708	Age	01/01/03
R9-31-1709	Ineligibility for Title XIX	01/01/03
R9-31-1710	Institutionalized Person	01/01/03
R9-31-1711	Other Health Coverage	01/01/03
R9-31-1712	State Health Benefits	01/01/03
R9-31-1713	Prior Health Insurance Coverage	01/01/03
R9-31-1714	Premium	01/01/03
R9-31-1715	Non-Payment of Premium	01/01/03
R9-31-1716	Verification	01/01/03
R9-31-1717	Assignment of Rights	01/01/03
R9-31-1718	Approval and Effective Date of Eligibility	01/01/03
R9-31-1719	Enrollment	01/01/03
R9-31-1720	Change and Redetermination	01/01/03

R9-31-1721	Denial of Eligibility	01/01/03
R9-31-1722	Discontinuance of Eligibility	01/01/03
R9-31-1723	Newborn Eligibility	01/01/03
R9-31-1724	Grievance and Request for Hearing Process	01/01/03

TITLE 9. HEALTH SERVICES
CHAPTER 32. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
PRESCRIPTION MEDICATION COVERAGE PILOT PROGRAM

Laws 2001, Chapter 347.

ARTICLE 1 – DEFINITIONS

R9-32-101	General Definitions	11/01/01
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ARTICLE 2 – GENERAL PROVISIONS AND STANDARDS

R9-32-201	General Requirements	11/01/01
R9-32-202	Funding and Expenditures	11/01/01
R9-32-203	Pilot Program Termination	11/01/01
R9-32-204	Termination Notification	11/01/01

ARTICLE 3 – SCOPE OF SERVICES

R9-32-301	Pharmaceutical Services	11/01/01
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ARTICLE 4 – PILOT PROGRAM DEDUCTIBLES AND BENEFITS

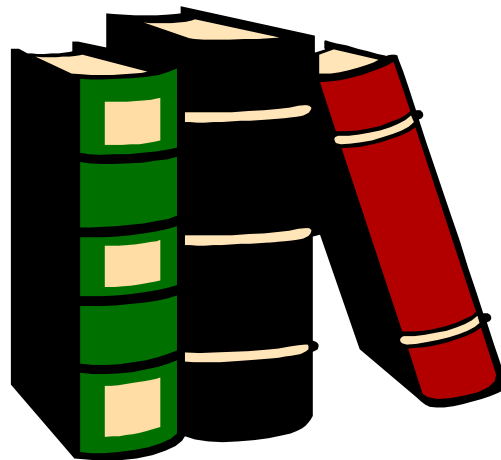
R9-32-401	Deductibles	11/01/01
R9-32-402	Benefits	11/01/01

ARTICLE 5 – ELIGIBILITY AND ENROLLMENT

R9-32-501	Conditions of Eligibility	11/01/01
R9-32-502	Applications	11/01/01
R9-32-503	Enrollment	11/01/01
R9-32-504	Reenrollment	11/01/01

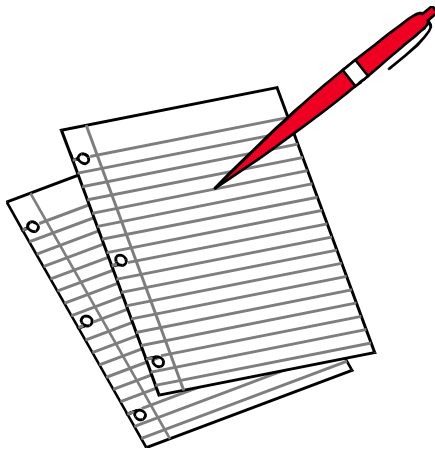
**Copies of these rules may be obtained from the
Office of the Secretary of State in accordance
with their fee schedule by calling (602) 542-4086.**

Substantive Policy Statements



Manual	Responsible Individual
KidsCare Manual This manual sets forth policies and procedures for determining eligibility for the AHCCCS KidsCare program.	Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512
AHCCCS Medical Benefits Eligibility Policy and Procedures Manual This manual sets forth policies and procedures for determining eligibility for the AHCCCS cost sharing Programs.	Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512
ALTCS Eligibility Policy and Procedure Manual This manual sets forth policies and procedures for determining eligibility for the AHCCCS Long Term Care Program.	Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512
SSI/MAO Policy and Procedures Manual This manual sets forth policies and procedures for determining eligibility for the AHCCCS SSI/MAO program.	Nancy Noto AHCCCS Administration, DMS 801 East Jefferson, MD 2600 Phoenix, Arizona 85034 Telephone: (602) 417-4512

Incorporations By Reference



TITLE 9. HEALTH SERVICES
CHAPTER 22. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS)
ADMINISTRATION

Description	Title	Rule
42 CFR 455.101	September 30, 1986	R9-22-106
42 CFR 418.202	December 20, 1994	R9-22-213(A)(8)(b)
42 CFR 441 Subpart B	January 29, 1985	R9-22-213(B)(2)
42 U.S.C. 1396d(r)(5)	April 4, 1990	R9-22-213(A)(9)
1634 Agreement between State of Arizona and DHHS	October 1, 1982	R9-22-512(F)(5)
42 U.S.C. 1396u-2(d)(3)	August 5, 1997	R9-22-601(B)
42 CFR 431.107(b)	April 6, 1992	R9-22-703(A)
42 CFR 447.45	February 15, 1990	R9-22-703(C)(2)
42 U.S.C. 1396u-2	August 5, 1997	R9-22-705(B)2
42 CFR 447.205	December 19, 1983	R9-22-710(B)
42 CFR 447.331 through 447.332	July 31, 1987	R9-22-710(B)(2)
42 USC 300gg(c)	January 5, 1999	R9-22-2003(A)(5)

TITLE 9. HEALTH SERVICES
CHAPTER 27. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) HEALTH CARE FOR PRIVATE EMPLOYER GROUPS/AHCCCS ADMINISTERED

42 U.S.C. 1396u-2	August 5, 1997	R9-27-209(A)(1)
42 U.S.C. 1396u-2	August 5, 1997	R9-27-209(B)(1)
29 U.S.C. 1161 et seq.	December 19, 1989	R9-27-406

TITLE 9. HEALTH SERVICES
CHAPTER 28. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) ARIZONA LONG-TERM CARE SYSTEM

42 CFR 441.151	May 22, 2001	R9-28-204(D)(5)
42 CFR 483 Subpart I	February 28, 1992	R9-28-204(D)(2)
42 CFR Part 418.202	December 20, 1994	R9-28-206(4)(b)
42 CFR 435.403	December 21, 1990	R9-28-403
In Section 2 of the AFDC State Plan as it existed on July 16, 1996	January 06, 1999	R9-28-402(A)(6)
42 U.S.C. 1396p(c)(1)(A)	August 10, 1993	R9-28-409(A)
42 U.S.C. 1396p(c)(1)(B)	August 10, 1993	R9-28-409(B)
42 U.S.C. 1396p(c)(2)	August 10, 1993	R9-28-409(C)
42 U.S.C. 1396p(c)(1)(C)	August 10, 1993	R9-28-409(D)
42 U.S.C. 1396p(c)(2)(C)	August 10, 1993	R9-28-409(G)(1)
42 U.S.C. 1396r-5(c)(1)	September 30, 1989	R9-28-410(B)(1)(a)
42 U.S.C. 1396r-5(f)(2)	September 30, 1989	R9-28-410(B)(1)(b)
42 U.S.C. 1396r-5(c)(2)	September 30, 1989	R9-28-410(B)(1)(c)
42 U.S.C. 1396r-5(b)(2)	October 1, 1993	R9-28-410(C)(1)
42 U.S.C. 1396r-5(d)(1) and (2)	September 30, 1989	R9-28-410(C)(4)
42 U.S.C. 1396r-5(f)	September 30, 1989	R9-28-410(D)(1)
42 CFR 442	September 28, 1995	R9-28-503(A)
42 CFR 483	September 29, 1995	R9-28-503(A)
42 CFR 442, Subpart C	November 20, 1992	R9-28-503(B)
42 CFR 483	September 29, 1995	R9-28-503(B)
42 CFR 482	September 9, 1996	R9-28-505(B)
42 CFR 456(C)	September 29, 1978	R9-28-505(B)

42 CFR 456 Subparts C, D, and F	December 1, 1986	R9-28-511(2)
42 USC 1396r	August 5, 1997	R9-28-606(B)
42 CFR 488, Subpart F	May 17, 1999	R9-28-606(B)
42 CFR 447.205	January 18, 1984	R9-28-708(B)
42 CFR 447. 331 through 447.332	October 29, 1987	R9-28-708(B)(4)
42 U.S.C. 1396(p)	October 1, 1993	R9-28-906(A)(2)
TITLE 9. HEALTH SERVICES		
CHAPTER 29. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) QUALIFIED MEDICARE BENEFICIARY (QMB)		
42 U.S.C. § 1396d(p) and 42 CFR 435, Subpart J	August 5, 1997	R9-29-201(A)
42 CFR 435.403	November 21, 1990	R9-29-201(D)
42 CFR 431.210, 431.211, 431.213, and 435.919	April 28, 1993	R9-29-203(A)
TITLE 9. HEALTH SERVICES		
CHAPTER 30. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) PREMIUM SHARING DEMONSTRATION PROJECT		
None.		
TITLE 9. HEALTH SERVICES		
CHAPTER 31. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) PREMIUM SHARING DEMONSTRATION PROJECT		
42 CFR 441, Subpart B	January 29, 1985	R9-31-213(B)(2)
20 CFR 416, Appendix to K	June 6, 1997	R9-31-304(D)(1)
42 U.S.C. 1397	August 5, 1997	R9-31-501(B)
42 CFR 455, Subpart B	September 30, 1986	R9-31-520(B)(4)
42 U.S.C. 1396u-2	August 5, 1997	R9-31-705(B)(2)
42 CFR 433.154	May 12, 1980	R9-31-1001(D)(4)(a)
42 CFR 441, Subpart B	January 29, 1985	R9-31-1612(B)(2)
42 CFR 447.45	February 15, 1990	R9-31-1618(B)(2)
TITLE 9. HEALTH SERVICES		
CHAPTER 32. ARIZONA HEALTH CARE COST CONTAINMENT SYSTEM (AHCCCS) PRESCRIPTION MEDICATION COVERAGE PILOT PROGRAM		
None.		

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